

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

538877

APPLICANT(S)

FILING DATE

3-30-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	END.	DEP.	END.	DEP.	END.	DEP.
1	1		1			
2		1		1		
3	1		1			
4		1		1		
5						
6						
7						
8	1		1			
9						
10						
11						
12						
13	1		1			
14		1		1		
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18	1		1			
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24	1		1			
25		1		1		
26	1		1			
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31	1		1			
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36	1		1			
37						
38						
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41	1		1			
42						
43						
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45						
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48						
49						
50						
TOTAL END.	10		10			
TOTAL DEP.	36	↔	30	↔		
TOTAL END.	46	↔	40	↔		

END.	DEP.	END.	DEP.	END.	DEP.
61					
62					
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99					
100					
TOTAL END.					
TOTAL DEP.					
TOTAL END.					